PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

1000685451

CLAIMS AS FILED - PART I								SMALL ENTITY		OTHER THAN		
T 0	TAL OLABAO		(Column 1)		(Column 2)]	TYPE		OR	SMALL	ENTITY
TOTAL CLAIMS			33		A Company of the second			RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			カカminus 20=		• 13			X\$ 9=	:	OR	X\$18=	234
INDEPENDENT CLAIMS			27 minus 3 =					X40=		OR	X80=	,
MU	LTIPLE DEPEN	DENT CLAIM PI	ESENT					+135=		OR	+270=	
* If	the difference	less than ze	ss than zero, enter "0" ir			ı	TOTAL		OR	TOTAL	944	
CLAIMS AS AMENDED - PART II								•			OTHER	THAN
		(Column 1)	(Colum			(Column 3)	_	SMALLE	ENTITY	OR	SMALL	ENTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT	# # # # # # # # # # # # # # # # # # #	PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***	T CLAIM	=	 	X40=		OR	X80=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+135=		OR	+270=	
								TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colu	ımn 2)	(Column 3)		ADDII. FEE	<u> </u>		ADDIT: 1 EE	
		CLAIMS		HIG	HEST		Ίı		ADDI-			ADDI-
AMENDMENT B		REMAINING AFTER AMENDMENT		PREV	MBER IOUSLY FOR	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***	T CL AIM]= -	4	X40=		OR	X80=	
<u> </u>	FIRST PRESE	NTATION OF M	OLITPLE DEF	CNDEN	1 CLAIIVI		_	+135=		OR	+270=	
								TOTAL		OR	TOTAL	
					•	(0. 1		ADDIT. FEE		8	ADDIT. FEE	
_		(Column 1) CLAIMS			ımn 2) HEST	(Column 3	۱,		4 5 5 1	Ī		100
AMENDMENT C		REMAINING AFTER AMENDMENT		NUI PREV	MBER IOUSLY D FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	1	X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***	IT OL ALL	<u> </u>	4	X40=		OR	X80=	
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+135=		OR	+270=	
 If the entry in column 1 is less than the entry in column 2, write "0" in column 3. If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." 								TOTAL		ł	TOTAL	
**	If the "Highest Nu	ımber Previously I	Paid For" IN THI	S SPACE	is less the	an 3, enter "3."		ADDIT. FEE		OR	ADDIT. FEE	L
	The "Highest Nur	nber Previously P	aid For" (Total o	r Indepen	dent) is th	e highest numb	ber fo	und in the ap	propriate bo	x in co	olumn 1.	